Page: 3 of 6

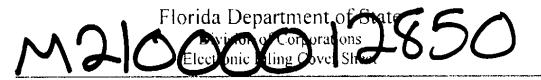
2021-09-29 13:34:56 CST

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From: Kimberly Laughrey

9/29/21, 3:32 PM

Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (614)280-3338

Fax Number

: (954)208-0845

*Enter the email address for this business entity to be used for future for the control one email address please.**

| Email | Address: | | _ | |
|-------|----------|--|---|--|
| | | | | |

Foreign Limited Liability Company Kaiser Aluminum Warrick, LLC

| Certificate of Status | Ú |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$155.00 |

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Help.

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED DABIUTY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| . Kaiser Aluminum Warr | | | A | <u>. </u> |
|--|---|------------------------------|--|--|
| (Name of Foreign) | imited Linbility Company; must include "Limite | d t,mbudy | Company, fallet, or the f | |
| If name unavailable, enter alternate n | ame adopted for the purpose of transacting business in F | londa The a | illernate name must include "Limited Liability C | "Genpany," "I. L.C," or "T LC." |
| Delaware | | 3 | | |
| (Jurisdiction under the law of w | inch foreign limited liability company is organized? | ٠,٠ | (FEI number, if ap | plicable) |
| L | | | | |
| · | (Date first transacted business in Florida, if prior to (See sections 605,0001 to 605,0905; F.S. to determ | reinstration me penalty l |) iabilny) | |
| 27422 Portola Parkway | v. Ste. 200 | 6 | 27422 Portola Parkway, Ste. 200 | |
| street Address of Principal Office) | | o. <u>-</u> | (Mailing Address) | |
| Foothill Ranch, CA 920 | 510 | _ | Foothill Ranch, CA 92610 | |
| | | | | ~ |
| . Name and street address | s of Florida registered agent: (P.O. Box | v <u>NOT</u> a | eceptable) | (2) |
| | C T Corporation System | | | 29 |
| Name: | | | | 75 8 57 |
| Office Address: | 1200 South Pine Island Road | | | е: 53 |
| | Plantation | | , Florida | |
| | (City) | | (Zip code) | |

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

| By: | CT Corporation System . Alexander Color | Jessica Hale, Asst. Secretary |
|-----|---|-------------------------------|
| | (Represent's signature) | |

Page: 5 of 6

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

| Title or Capacity: | Name and Address: | | Title or Capacity: | | Name and Address: | |
|--------------------|--------------------------------------|-----|--------------------------|-------------|-----------------------------|----|
| ⊡Manager | Name: Keith A. Harvey | | ®Manager | Name: John | M. Donnan | |
| □Member | Address: 27422 Portola Parkway, Ste. | 200 | □Member | Address: 27 | 422 Portola Parkway, Ste. 2 | 00 |
| □Authorized | Foothill Ranch, CA 92610 | | □Authorized | | ch, CA 92610 | |
| Person | | | Person | | | |
| NOther President & | CEO UOther | | X Other EVP,CAO & | & GC | Other | |
| ☑ Manager | Name: Neal E. West | | ∐Manager | Name: | | |
| ⊞Member | Address: 27422 Portola Parkway, Ste. | 200 | □Member | Address: | | |
| □Authorized | Foothill Ranch, CA 92610 | | □ Authorized | | , | |
| Person | | | Person | | | |
| ■Other EVP & CFC | Other | | € Other | | □Other | |
| □Маладег | Name: | | □Manager | Name: | | |
| □Member | Address: | | □Member | Address: | | |
| □Authorized | | | □Authorized | | | |
| Person | | | Person | | | |
| Other | COther | | □Other | <u>-</u> | □Other | |

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 5.817,155, F.S.

| - Just | 4-2 |
|----------------|-----------------------------------|
| John M. Donnan | Signating of an autharized person |
| | Typed or printed name of agree |

^{9.} Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "KAISER ALUMINUM WARRICK, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

e at corn delaware gov/authy

Authentication: 204271731

Date: 09-28-21